

	WAN Service Request Form (STS01)		Date: / /		Page 1
	NC Department of Information Technology Service Delivery PO Box 17209; Raleigh, North Carolina 27619-7209 DIT Home Page Web Address: https://it.nc.gov/ DIT Service Desk:(919)-754-6000;1-800-722-3946 Upload this completed form to the DIT Service Now Portal: https://ncgov.service-now.com/sp_dit ***Sign into the Service Now Portal using NCID credentials & attach this form to your request.			Billing Location Code (DIT Use):	
	SLA (DIT Use): Individual / Global			NSWAN Site number (DIT Use):	
	Service Description / Service Level Agreement			Service request number (DIT Use):	
Please answer all questions below to expedite processing of this order. Please print or type.					
Requestor Name:			Requestor Daytime Telephone Number: () -		
Requestor E-mail:			Requestor Fax Number: () -		
Department Code: (billing information) _____		Department Name:		Division:	
Federal ID:		Bill -To Telephone Number: () - (Telephone # to install Broadband service)			
<input type="checkbox"/> New <input type="checkbox"/> Termination <input type="checkbox"/> Change (Specify Upgrade, Relocate or Billing):				*DIT will perform this change during business hours, unless otherwise specified in Remarks/Special Instructions below.	
WAN: 256K <input type="checkbox"/> 1.5M <input type="checkbox"/> 3M <input type="checkbox"/> 6M <input type="checkbox"/> 10M <input type="checkbox"/> 20M <input type="checkbox"/>		L2 DIT MAN: 100M <input type="checkbox"/> 1G <input type="checkbox"/>		<input type="checkbox"/> Broadband	
50M <input type="checkbox"/> 100M <input type="checkbox"/> 250M <input type="checkbox"/> 500M <input type="checkbox"/> 1G <input type="checkbox"/> 2G <input type="checkbox"/>					
QoS <input type="checkbox"/>	No. of Devices requiring IP addresses		Location for circuit Demarc :		
Site Name (Project):					
Street Address:		City:	County:	Zip Code:	Room:
					Wiring Closet:
Site Contact Name:			Site Contact Fax Number: () -		
Site Contact E-mail:			Site Office Hours:		
Site Contact Telephone Number: () -			Contact Telephone Number: () -		
Site Technical Contact Name:			Site Telephone Number: () -		
Site Technical Contact E-mail:			Site Technical Contact Telephone Number: () -		
<u>Remarks / Special Instructions:</u>					
<u>Customer Information and Responsibilities</u>					
<ul style="list-style-type: none"> • WAN service installation occurs between 90 – 120 days from the date of the FULLY COMPLETED request form. • If information is not completed correctly, then service installation dates will be extended beyond 90 – 120 days. • Please be specific in your description of the Building and Room # (Address of Service Installation) to ensure the data circuit is installed within close proximity of the network equipment rack. • Provided that a signature is on file, customers may upload this form to the DIT Service Portal: https://ncgov.service-now.com/sp_dit • Customer acknowledges they have read and understood the terms and provisions in the Service Level Agreement (SLA) and accepts the terms and conditions as indicated. 					
Fiscal Office/Budget Authorization Signature: _____					<input type="checkbox"/> Signature on File